

Pediatricians Decry Abstinence-Only Ed



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A leading group of pediatricians says teenagers need access to birth control and emergency contraception, not the abstinence-only approach to sex education favored by religious groups and [President Bush](#).

The recommendations are part of the American Academy of Pediatrics' updated teen pregnancy policy.

"Even though there is great enthusiasm in some circles for abstinence-only interventions, the evidence does not support abstinence-only interventions as the best way to keep young people from unintended pregnancy," said Dr. Jonathan Klein, chairman of the academy committee that wrote the new recommendations.

Teaching abstinence but not birth control makes it more likely that once teenagers initiate sexual activity they will have unsafe sex and contract sexually transmitted diseases, said Dr. S. Paige Hertweck, a pediatric obstetrician-gynecologist at the University of Louisville who provided advice for the report.

The report appears in July's Pediatrics, being published Tuesday.

It updates a 1998 policy by omitting the statement that "abstinence counseling is an important role for all pediatricians." The new policy says that while doctors should encourage adolescents to postpone sexual activity, they also should help ensure that all teens — not just those who are sexually active — have access to birth control, including emergency contraception.

Wade Horn, assistant secretary for children and families at the U.S. [Department of Health and Human Services](#), said counseling only abstinence, preferably until marriage, is the best approach because it sends a clear, consistent message. Teenagers who are sexually active should have access to contraception, but making birth control available to teens who aren't sends a contradictory message, he said.

The academy's recommendations "to some extent confuse prevention and intervention," Horn said.

Citing 2003 government data, the academy's report says more than 45 percent of high school girls and 48 percent of boys have had sexual intercourse. While teen pregnancy rates have decreased in recent years, about 900,000 U.S. teens get pregnant each year.

Moreover, U.S. teen birth rates are higher than in comparable industrialized countries, which may be partly due to greater access to contraception in some countries, the report said.

The Medical Institute for Sexual Health, a nonprofit group that has worked on pro-abstinence programs with the Bush administration and faith-based groups, opposes the academy's policy shift.

"I don't think it's a smart move at all," said group founder Dr. Joe McIlhaney Jr., an obstetrician-gynecologist.

However, Karen Pearl, interim president of the [Planned Parenthood](#) Federation of America, said the academy "is to be applauded ... for having medicine trump ideology."

HHS' Horn also said advising pediatricians to ensure that teens have access to emergency contraception is problematic for doctors and parents who morally object to the pills. He faulted the report for lacking guidance on what to do when pediatricians' moral views differ from their patients' parents.

Emergency contraception, sometimes called the morning-after pill, blocks ovulation or fertilization and can prevent pregnancy for up to three days after sex. Opponents consider it a form of abortion because it is thought to also help prevent fertilized eggs from implanting in the womb, and some pharmacists have refused to sell it.

Emergency contraception was not mentioned in the old report because it was new and relatively untested, Klein said.

The academy supports making morning-after pills available without a prescription, Klein said.